## PART B - FEE(S) TRANSMITTAL

0000 . ..... Seamed bannak 00/11/010

Complete and send this form, together with applicable fee(s), to: Mail

Mail Stop ISSUE FEE
Commissioner for Patents
P.O. Box 1450
Alexandria, Virginia 22313-1450
(571)-273-2885



INSTRUCTIONS: This form should be used for transmitting the ISSUE FEE and PUBLICATION FEE (if required). Blocks 1 through 5 should be completed where appropriate. All further correspondence including the Patent, advance orders and notification of maintenance fees will be mailed to the current correspondence address as indicated unless corrected below or directed otherwise in Block 1, by (a) specifying a new correspondence address; and/or (b) indicating a separate "FEE ADDRESS" for

ndicated unless correcte naintenance fee notifica	ed below or directed otl tions.	herwise in Block 1, by (a	a) specifying a new corres	pondence address; and/or	r (b) indicating a sep	arate "FEE ADD!	RESS" for	
CURRENT CORRESPONDENCE ADDRESS (Note: Use Block 1 for any change of address)				Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission.				
35525	7590 10/10	0/2007	have	its own certificate of ma	iling or transmission.			
	IBM CORP (YA)				Certificate of Malling or Transmission			
			i ne State	I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope				
C/O YEE & ASSOCIATES PC				essed to the Mail Stop smitted to the USPTO (57	ISSUE FEE address	above, or being	facsimile	
P.O. BOX 802333 DALLAS, TX 75380				smilled to the USP1U (37	1) 273-2883, On the C		<del></del>	
DALLAS, IA I	3300		<u> </u>			(Оеро	sitor's name)	
							(Signature)	
							(Date)	
APPLICATION NO. FILING DATE		FIRST NAMED INVENTOR	ATTO	RNEY DOCKET NO.	CONFIRMATIC	N NO.		
10/782,674 02/19/2004		Adam D. Iley	G	B920030077USI	5227			
TILE OF INVENTION	: METHOD, APPARAT	IUS AND COMPUTER F	PROGRAM FOR EXECUT	'ING A PROGRAM BY I	NCORPORATING T	THREADS		
APPLN. TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE DUE	PREV. PAID ISSUE FEE	TOTAL FEE(S) DUE	DATED	UE	
nonprovisional	NO	\$1440	\$300	\$0	\$1740	01/10/2	p08	
EXAMINER ART UNIT			CLASS-SUBCLASS				)	
KHATRI, ANIL 2191			717-141000					
. Change of corresponde	ence address or indicatio	n of "Fec Address" (37	2. For printing on the p		Duke	W. Yee		
	ondence address (or Cha	ange of Correspondence	(1) the halles of up to 5 registered patent disorners				4	
Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.  Or agents OR, alternatively,  (2) the name of a single firm (having as a member a							quez	
"Fee Address" ind	ication (or "Fee Address	" Indication form	registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.				1	
PTO/SB/47; Rev 03-0 Number is required.	2 or more recent) attach	hed. Use of a Customer					icy_	
ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)								
PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has be recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.  (A) NAME OF ASSIGNEE  (B) RESIDENCE: (CITY and STATE OF COUNTRY) AUGUSDAF 2 0000008 090447							10782674	
(A) NAME OF ASSI	GNEE		(B) RESIDENCE: (CITY	and STATE OR COUNT			10/000/4	
Internat	ional Bus	lness	Armonk, 1	// # FE:19	01 1440.00 04 309.00	DA		
Machine	s Coronnat	1071	-	,				
lease check the appropr	iate assignee category or	r categories (will not be p	rinted on the patent) :	Individual M Corporat	ion or other private gr	oup entity $\Box G$	vernment	
			h Doument of Eas(a): (Place	so first roomaly any are	viously naid issue fee	shown above)		
a. The following fee(s):  ssue Fee	are submitted.	7	b. Payment of Fce(s): (Please first reapply any previously paid issue fee shown above)					
Publication Fee (No small entity discount permitted)			Payment by credit car	d. Form PTO-2038 is atta	ached.			
Advance Order - # of Copies			The Director is hereby overpayment, to Depo	authorized to charge the	required fee(s), any d	eficiency, or cred	t any	
			overpayment, to Depo	sit Account Number [H-	0447 (enclose	an extra copy of the	nis form).	
Change in Entity Status (from status indicated above)  a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27.  b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).								
IOTE: The Issue Fee and Publication Fee (if required) will not be accepted from anyone other than the applicant; a registered attorney or agent; or the assignee or other establishments of the United States Patent and Trademark Office.							er party in	
nterest as snown by the	records in the Orlinca sta	A 1	. Onia.			<u> </u>	<del></del>	
Authorized Signature							<del>-</del> .	
Typed or printed name Peter B. Manzo Registration No. 54,700								
his collection of information is required by 37 CFR 1.311. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO) in application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, pred ubmitting the completed application form to the USPTO: Time will vary depending upon the individual case. Any comments on the amount of time you require to his form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Common Information Officer, U.S. Patent and Trademark Office, U.S. Department of Common Information United Programs 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Information United Programs 22313-1450.  Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.							to process) paring, and po complete nerce, P.O. Box 1450,	